

Montgomery County Commission on Veterans Affairs
FY 10 Budget Priorities before the Montgomery County Council
April 15, 2009
Bill Gray - Chairman
Jonathan B. Walker Sr. PE, - Vice-Chairman

My name is Bill Gray, Chairman, Commission on Veterans Affairs. Along with me are Jonathan Walker, Sr., Vice-Chair and other Commissioners. We want to thank County Executive Leggett and the Council for creating and passing the legislation to create a county Commission on Veterans Affairs. Over the last several months, we have setup committees and have begun outreach to our veterans in the County. As a commission we have started to work on our mission and evaluating the immediate needs of our veterans:

1. Veterans Recognition Workgroup

The Commission has established a workgroup which will develop plans to honor and recognize our fallen heroes, the outstanding work of our veterans, veterans businesses, volunteers, and our Gold Star mothers and Fathers. We will be coming to you to assist us in recognition events and funding.

2. Services Coordination and Technical Assistance to Veterans applying for Benefits and Compensation

Some state and county governments have paid accredited Veterans Service Officers on staff to assist veterans and families who are seeking services or applying for benefits. Montgomery County does not have an in-house service program to assist veterans. We recommend that for the new 311 Information Line that staff be trained on Veterans issues and benefits. We further ask that the Council provide at least one staff work year for information and referral on veterans benefits to include evening and weekend hours. Veterans often need assistance in filling out the forms before being sent to Baltimore for evaluation. Our goal is to shorten the process instead of having veterans wait 18-24 months.

2. Post Traumatic Stress Disorder (PTSD) and other Prevalent Health and Wellness Issues

The Veterans Administration will treat vets for PTSD but not the families dealing with it. We need county funding to do the initial diagnosis of PTSD in order to refer the veteran to the VA initially. The new out processing procedures catch the majority of PTSD cases but not all of them. Nobody likes to admit they have a problem and most deny it until they are forced to face it by their families or the courts. We should make it clear that the PTSD funding is to supplement and not replace already available VA programs. These will include programs and support groups for female and male veterans and their children in conjunction with PTSA and other service connected issues among the military returning from Iraq and Afghanistan. We will be looking at all service related health and wellness issues. The VA Medical Center in Washington DC has offered to provide to veterans monthly training on medical services for veterans with special needs. We ask that you designate \$5,000 to defray the mileage, room and refreshment cost of having one or two evenings set aside each month for briefings for veterans living in the county.

3. Outreach to Homeless and Incarcerated Veterans

Because many of the homeless population in this county are veterans, we request that the Council allow the Commission to partner with other agencies and organizations to meet the following objectives:

****Re-establish the homeless outreach program for veterans in Montgomery County homeless shelters.**

****Re-establish veteran's priority beds at shelters such as Carroll House and other county facilities. The commission will draft a set of guidelines and recommendations for your review.**

4. Employment, Business Opportunities and Benefits

From an economic development perspective, we want returning war veterans to know that Montgomery County is welcoming them back with open arms. Montgomery County is the ideal location for veterans to use their VA benefits to buy homes, to start businesses, or to get an education. Veterans are welcome to leverage their federal benefits and complement them with state and county benefits to achieve these goals here in our county. The Commission is willing to facilitate training or meetings on homeownership, business start up and other related business and work programs

Please see the attached workgroups of the Commission, and we invited you to attend our meetings. Thank you for the opportunity to share our priorities with you. We look forward to working with you and hope our partnership will continue to send a message that veterans are an important part of Montgomery County.

Attachment I - Montgomery County Commission on Veterans Affairs
Proposed Workgroups – April 14, 2009 – Draft to be Approved at May 11, 2009 Meeting
Bill Gray, Chair – Jonathan Walker, Sr. PE, Vice-Chair

Please note that each workgroup will determine any needs assessment required and may include but not be limited to future needs, services and programs, including prevention and intervention programs that the Department of Veterans Administration, State of Maryland and Montgomery County government provide to veterans and their families.

1. Veterans Recognition Workgroup will assist the County in planning appropriate public acknowledgment of the contributions made by veterans, and assist in planning commemoration activities recognizing the contributions made by veterans to now include those from Iraq/Afghanistan.

Mike Subin – Chair

Peter Esker
Mier Wolf
Paula Davis
Carol and Tom Barbieri
Karen McManus- Office of Congressman Chris Van Hollen

2. Veterans Health& Wellness Workgroup will work on issues that include health related issues affecting the needs of soldiers returning from Iraq and all other veterans including senior issues:

Post Traumatic Stress Disorder(PTSD)	Court System	Mental Health
Domestic Violence	Substance Abuse	Suicide Prevention
Traumatic Brain Injury(TBI)	Hearing loss	Blindness/Vision loss
Cancer	AIDS	Long Term Care
Spinal Cord Injury	Amputation	Diabetes
Family Caregivers	Attendant care	Respite .

Jane McCarthy- Chair

Mauri Hamilton,	Rich Schiffauer	Jacqueline Hunt Ogg
Lorrie-Knight Major	Nelson Jackson	
Ann Humphrey – Office of Congressman Chris Van Hollen		
Ken Reichard – Office of Senator Ben Cardin		

3. Veterans/Families Benefits and Outreach Workgroup will work on service programs to veterans/families and create an educational outreach program to educate the public at-large on veteran benefits and issues. Evaluate a single point of entry or service coordination model to assist Veterans applying for benefits. Make recommendations for Website, speaker's bureau, etc. Study Best Practices and their implications locally.

Jonathan Walker- Chair

Gregory Hamilton	Bill Gray
Mike Subin	Margo Williams
	Jessica McNurlen

4. Housing, Homelessness & Incarcerated Veterans/Families Workgroup will create a report on the numbers of people impacted and a plan to provide long term housing and supports. Identify housing subsidies, loan and resources to stay in home. Identify legal Resources.

Roland Kauffman, Chair

Susan Kirk
Norm Locksley
Rich Schiffauer

5. Veterans Employment, Education & Business Workgroup will create a report on the numbers of people impacted and a plan to address business loans, employment, and educational opportunities.

Jerry Godwin – Chair

Rich Fales

Goal is for each workgroup to make recommendations by July 1st 2009 to County Executive and County Council and the state and federal reps with approval of Intergovernmental Affairs.

Email all edits and changes to betsy.luecking@montgomerycountymd.gov 240-777-1256

Attachment II - Commission on Veterans Affairs Testimony April 15, 2009
Data and Statistics from the Veterans Administration
From Mariam Chase, Program Manager II, Behavioral Health and Crisis Services

According to the Department of Defense's Web site, an estimated 5,000 military veterans commit suicide each year. Veterans of the wars in Iraq and Afghanistan reportedly make up about 35 percent of that statistic. Additionally, it was also revealed that between the years of 2002 and 2006, more than 250 veterans who left the military after 9/11 committed suicide.

The Army alone recently announced that 2008 was its highest year in suicides since 1980. In an attempt to help veterans' friends and family to cope with these problems, the Department of Veteran Affairs created 1-800-273-TALK, a hotline meant to focus on suicide prevention.

PTSD is the Most Prevalent Mental Illness among Service Members Returning from Iraq.

PTSD Incidence

General Population	3%-4%
Vietnam Veterans	15%
1st Gulf War veterans	2%-10%

VA reports more than 24,000 women veterans, evaluated from 2002 to August 2006, with PTSD post-deployment

On top of PTSD, women in the Military are also dealing with sexual assault issues:

- A big contributor to psychological problems for women in uniform, according to experts, is **military sexual trauma** – a term that covers verbal harassment and physical assault – strong risk factors for PTSD.
- Sexual assault reports across the Armed Forces increased from 1,700 in 2004 to 2,947 in 2006, then dipped to 2,688 in 2007, according to the Sexual Assault Prevention and Reporting Office at the Pentagon. In the Central Command region, which includes Iraq, Afghanistan, and Kuwait, there were 206 reports in 2006 and 174 in 2007. Reports of sexual assault are alarming, suicide rates are climbing and over 36,000 women have been in VA hospitals since leaving the service. As of February, 2008, 102 female soldiers had died in Iraq.
- Reports of sexual assault are alarming, suicide rates are climbing and over 36,000 women have been in VA hospitals since leaving the service. As of February, 2008, 102 female soldiers had died in Iraq.
- Last year, the VA treated more than 255,000 female veterans. The number is expected to *double* within five years.
- Concern is mounting over the number of female veterans suffering from military sexual trauma, which can include rape, assault and harassment. According to the VA, nearly one in five female veterans seeking care has been diagnosed as a victim of military sexual trauma, though some believe the figure could be nearer to one in three. The character Melissa in the comic strip Doonesbury was a victim.